

POLICY REQUIREMENTS BASED ON SUPPORT LEVELS

INTELLECTUAL DISABILITY SERVICES

			INDIVIDUALIZED							
POLICY SECTION	POLICY/TOPIC	FAMILY SUPPORTS	INITIAL	AFTER 2 YRS. OF SERVICE	DAY SUPPORTS	RESIDENTIAL SUPPORTS	CONSULTANT (AGENCY)	SPECIALIZED SERVICES		
		Personal Supports, Adult Companion, Respite, Individualized Day, Transportation	Individualized Home Supports (IHS)		Group Day, Individualized Supported Employment, Supported Employment	Community Living Arrangement, Community Companion Home, Continuous Residential Service, Overnight Respite Facility	CLINICAL BEH OR HEALTHCARE COORDINATION	TRANSP	ADULT DAY HEALTH	CAMPS OR PARENTING SUPPORT
ADMINISTRATIVE/ OVERARCHING POLICY STATEMENTS	HIPAA	X	X	X	X	X	X	X		
	Anti-Discrimination	X	X	X	X	X	X	X		
	Drug Free Workplace	X	X	X	X	X	X	X		
	Smoking	X	X	X	X	X	X	X		
PERSONNEL PRACTICES	Criminal Background Check	X	X	X	X	X	X	X	X	X
	Sexual Offender Registry Check	X	X	X	X	X	X	X	X	X
	Motor Vehicle License Check	X	X	X	X	X	X	X	X	X
	DDS Abuse/Neglect Registry	X	X	X	X	X	X	X	X	X
AGENCY OPERATIONS	Supervision of Staff	X	X	X	X	X	X	X		
	Back Up Staffing	X	X	X	X	X	X	X		
	Transporting Individuals	X	X	X	X	X				
	Emergency Response to Individuals		X	X	X	X				
	Capacity to respond to emergency situations	X*	X*	X	X	X				
	Continuity of Operations Planning (COOP)	X*	X*	X	X	X				
	Quality Improvement Planning	X	X	X	X	X	X			
STAFF TRAINING	Knowledge of approved and prohibited physical management techniques	X	X	X	X	X	X			
	Training of direct service staff	X	X	X	X	X	X			
	Training of professional staff in clinical disciplines				X	X	X			
	Training of professional staff in procedures critical to their clinical role				X	X	X			
INDIVIDUAL PROTECTIONS	Prevention of Abuse/Neglect	X	X	X	X	X	X	X	X	
	Incident Reporting	X	X	X	X	X	X	X	X	
	Program Review/Committee			X		X				
	Human Rights/Committee			X	X	X			X	
	Medication Administration				X	X				
PROVISION OF SUPPORTS & SERVICES TO INDIVIDUALS	Person Centered Planning (Individual Plan)	X	X	X	X	X	X			
	Observing, Reporting and Responding to Changes that affect individual	X	X	X	X	X	X			
	Client Funds Management	X*	X*	X	X	X				
	Hot Water Temperature Safety				X	X				
	Safety Alert for Bathing and Personal Care	X	X	X	X	X				
	Water Safety	X	X	X	X	X				
	Behavior Support Planning			X	X	X				
	Behavior Modifying Medications			X	X	X				

* A modified policy can be submitted when providing Family Supports and Initial Individual Home Supports

4/24/15 dl